



In re Application of:

HIROKAZU KAWAMOTO, et al.

Application No.: 09/995,724

Filed: November 29, 2001

For: APPARATUS AND METHOD FOR CONTROLLING
USER INTERFACE

Mail Stop RCE
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Docket No.

00862.022450.

Examiner: Isaac M. Woo

Group Art Unit: 2172

Date: April 25, 2005

Sir:

Transmitted herewith is a Preliminary Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|------------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 40 | MINUS | 56 | = 0 | x \$25 \$50 | \$.00 |
| INDEP. CLAIMS | 9 | MINUS | 12 | = 0 | x \$100 \$200 | \$.00 |
| Fee for Multiple Dependent claims \$180°/\$360 | | | | | | \$.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--- | | | | | | \$.00 |

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Michael K. O'Neill
Attorney for Applicants
Registration No.: 32,622

FITZPATRICK, CELLA, HARPER & SCINTO
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00862.022450.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
HIROKAZU KAWAMOTO, et al.) Examiner: Isaac M. Woo
Application No.: 09/995,724) Group Art Unit: 2162
Filed: November 29, 2001)
For: APPARATUS AND METHOD)
FOR CONTROLLING USER)
INTERFACE) April 25, 2005

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Prior to further examination of the above-identified application for which a Request For Continued Examination has been filed, and in response to the Office Action dated January 25, 2005, please amend the above-identified application as follows:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

April 25, 2005

(Date of Deposit)

Michael K. O'Neill, Registration No. 32,622

(Name of Attorney for Applicant)

Signature

April 25, 2005

Date of Signature